

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

ADDRESS (number and street) ▼

50 F STREET NW

SUITE 900

☒ Check if different than previously reported. (ACC)

WASHINGTON

DC

20001

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00002238

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☒ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
06 01 2015

through

M M M / D D D / Y Y Y Y Y Y
06 30 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer KELSEY S BILLINGS

Signature of Treasurer

KELSEY S BILLINGS

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
08 17 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
06 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		25757.50
(b) Cash on Hand at Beginning of Reporting Period.....	61098.16	
(c) Total Receipts (from Line 19)	5830.00	83740.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	66928.16	109497.50
7. Total Disbursements (from Line 31)	17108.14	59677.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	49820.02	49820.02
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		0	1		2	0	1	5		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		3	0		2	0	1	5		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	4610.00	58925.00
(ii) Unitemized	1220.00	4815.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	5830.00	63740.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5830.00	83740.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5830.00	83740.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5830.00	83740.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	108.14	1177.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	108.14	1177.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17000.00	58500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	17108.14	59677.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17108.14	59677.48

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5830.00	83740.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5830.00	83740.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	108.14	1177.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	108.14	1177.48

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB
.

Form/Schedule: F3XA
Transaction ID :

ADJUSTMENT FOR PREVIOUSLY OMITTED INDIVIDUAL CONTRIBUTION OF \$100.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 16

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. BARRY SABLOFF

Mailing Address 280 WHITE OAK LN

City
WINNETKAState Zip Code
IL 60093-3630FEC ID number of contributing
federal political committee.

C

Name of Employer

COBANK

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2015

Transaction ID : A551EEDD318524C9EA5A

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DAN CHILDS

Mailing Address 12449 S. UNION RD

City
MANNSVILLEState Zip Code
OK 73447-1203FEC ID number of contributing
federal political committee.

C

Name of Employer

COBANK

Occupation

BOARD OF DIRECTORS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2015

Transaction ID : AC481FE20F2F9484F909

Amount of Each Receipt this Period

250.00

☐ Memo Item

RECEIPT

Full Name (Last, First, Middle Initial)

C. BILL SQUIRES

Mailing Address 2940 ST. THOMAS DRIVE

City
MISSOULAState Zip Code
MT 59803-2913FEC ID number of contributing
federal political committee.

C

Name of Employer

COBANK

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2015

Transaction ID : A697AF97E971248ECA68

Amount of Each Receipt this Period

250.00

☐ Memo Item

RECEIPT

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 16
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. JACK MCCORMICK

Mailing Address 101 BRIAN ST

City

ELLIS GROVE

State

IL

Zip Code

62241-1537

FEC ID number of contributing
federal political committee.

C

Name of Employer

GROWMARK, INC.

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 05 / 2015

Transaction ID : A0B1336111BD44B4B924

Amount of Each Receipt this Period

300.00

☐ Memo Item

RECEIPT

Full Name (Last, First, Middle Initial)

B. JAMES R MAGNUSON

Mailing Address 11698 HWY F 62 E

City

SULLY

State

IA

Zip Code

50251

FEC ID number of contributing
federal political committee.

C

Name of Employer

COBANK

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 15 / 2015

Transaction ID : A85753BADF3254D72A10

Amount of Each Receipt this Period

250.00

☐ Memo Item

RECEIPT

Full Name (Last, First, Middle Initial)

C. RONNIE MOHR

Mailing Address 5200 E 600 N

City

GREENFIELD

State

IN

Zip Code

46140-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer

LAND O' LAKES, INC.

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.00

Date of Receipt

06 / 19 / 2015

Transaction ID : AF4C551B078094976B66

Amount of Each Receipt this Period

60.00

☐ Memo Item

RECEIPT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

610.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. MARLIS CARSON

Mailing Address 1718 BAY STREET, SE

City
WASHINGTONState
DCZip Code
20003-1646FEC ID number of contributing
federal political committee.

C

Name of Employer

NATIONAL COUNCIL OF FARMER COOPERA

Occupation

SENIOR VP & GENERAL COUNSEL, LEGAL,

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	25	/	2015

Transaction ID : A7066476D43A44FC1A98

Amount of Each Receipt this Period

100.00

☐ Memo Item

RECEIPT

Full Name (Last, First, Middle Initial)

B. J. KEITH SPACKLER

Mailing Address PO BOX 2047

City
OMAHAState
NEZip Code
68103-2047FEC ID number of contributing
federal political committee.

C

Name of Employer

AG PROCESSING, INC.

Occupation

PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	25	/	2015

Transaction ID : A888F01FE791D4BD6906

Amount of Each Receipt this Period

1500.00

☐ Memo Item

RECEIPT

Full Name (Last, First, Middle Initial)

C. CHARLES F. CONNER

Mailing Address 310 MANSION DR

City
ALEXANDRIAState
VAZip Code
22302-2903FEC ID number of contributing
federal political committee.

C

Name of Employer

NATIONAL COUNCIL OF FARMER COOPERA

Occupation

PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	25	/	2015

Transaction ID : A093896F72372426C911

Amount of Each Receipt this Period

20.00

☐ Memo Item

RECEIPT

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1620.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. JACKIE KLIPPENSTEIN

Mailing Address 15945 HH HWY

City

PLATTE CITY

State

MO

Zip Code

64079-9198

FEC ID number of contributing
federal political committee.

C

Name of Employer

DAIRY FARMERS OF AMERICA

Occupation

VICE PRESIDENT, LEGISLATIVE & INDUSTR

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2015

Transaction ID : AD38C1CE9D7D448A7A95

Amount of Each Receipt this Period

100.00

☐ Memo Item

RECEIPT

Full Name (Last, First, Middle Initial)

B. JACKIE KLIPPENSTEIN

Mailing Address 15945 HH HWY

City

PLATTE CITY

State

MO

Zip Code

64079-9198

FEC ID number of contributing
federal political committee.

C

Name of Employer

DAIRY FARMERS OF AMERICA

Occupation

VICE PRESIDENT, LEGISLATIVE & INDUSTR

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2015

Transaction ID : A4004452731794AA5926

Amount of Each Receipt this Period

950.00

☐ Memo Item

RECEIPT

Full Name (Last, First, Middle Initial)

C. ROBERT B KRISLE

Mailing Address 127 BRIARWOOD DR

City

GREENBRIER

State

TN

Zip Code

37073-5258

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENNESSEE FARMERS COOPERATIVE

Occupation

CEO

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2015

Transaction ID : AD78BA48B441D48EAAA4

Amount of Each Receipt this Period

100.00

☐ Memo Item

RECEIPT

SUBTOTAL of Receipts This Page (optional)..... ►

1150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. CHARLES SPENCER

Mailing Address 487 SAMPSON RD

City
FAUCETT

State Zip Code
MO 64448-8146

FEC ID number of contributing
federal political committee.

C

Name of Employer

MFA INC.

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

06 / 25 / 2015

Transaction ID : A900FCD6C8BC44398AB4

Amount of Each Receipt this Period

20.00

☐ Memo Item

RECEIPT

Full Name (Last, First, Middle Initial)

B. DAVID WOMACK

Mailing Address PO BOX 154

City
HUXFORD

State Zip Code
AL 36543-0154

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALABAMA FARMERS COOPERATIVE

Occupation

BOARD OF DIRECTORS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

06 / 25 / 2015

Transaction ID : A4F0C62B61DE34D1AAAA

Amount of Each Receipt this Period

20.00

☐ Memo Item

RECEIPT

Full Name (Last, First, Middle Initial)

C. STEPHEN BRIGGS

Mailing Address 2205 17TH AVE SE

City
ABERDEEN

State Zip Code
SD 57401-7815

FEC ID number of contributing
federal political committee.

C

Name of Employer

SOUTH DAKOTA WHEAT GROWERS

Occupation

SENIOR VP OF AGRONOMY & CORPORATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

06 / 25 / 2015

Transaction ID : A2B2686C69D544AB3ADA

Amount of Each Receipt this Period

20.00

☐ Memo Item

RECEIPT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. GREG WICKHAM

Mailing Address 8369 VASSAR DR

City
MANLIUSState
NYZip Code
13104-9425FEC ID number of contributing
federal political committee.

C

Name of Employer

DAIRY FARMERS OF AMERICA

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 25 / 2015

Transaction ID : A6ED4C5DB4B9745EC939

Amount of Each Receipt this Period

20.00

☐ Memo Item

RECEIPT

Full Name (Last, First, Middle Initial)

B. MARLIS CARSON

Mailing Address 1718 BAY STREET, SE

City
WASHINGTONState
DCZip Code
20003-1646FEC ID number of contributing
federal political committee.

C

Name of Employer

NATIONAL COUNCIL OF FARMER
COOPERATIVE

Occupation

SENIOR VP & GENERAL COUNSEL, LEGAL,

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : A7197727CEC484A9D97A

Amount of Each Receipt this Period

400.00

☐ Memo Item

RECEIPT

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

420.00

TOTAL This Period (last page this line number only)..... ►

4610.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

A. SUNTRUST BANK

Date of Disbursement

Transaction ID : B3DEA8D16D4974E56869

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

82.83

 Memo Item

B. SUNTRUST BANK

Date of Disbursement

MM / DD / YYYY

Transaction ID : B8F125A22663A4B76B05

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

25.31

Memo Item

C.

Date of Disbursement

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

 Memo Item

108.14

108.14

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. HOOSIERS FOR ROKITA, INC.

Mailing Address 314 ARSENAL AVE.

City	State	Zip Code
INDIANAPOLIS	IN	46201

Purpose of Disbursement

011

Candidate Name

TODD E. ROKITA

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: IN District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2015

Transaction ID : B20E3BA0AA7E34014B97

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DONNELLY FOR INDIANA

Mailing Address 1050 17TH ST NW STE 590

City	State	Zip Code
WASHINGTON	DC	20036

Purpose of Disbursement

011

Candidate Name

JOE DONNELLY

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: IN District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2015

Transaction ID : BD983FE53967F48C3BBC

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONAWAY FOR CONGRESS

Mailing Address P.O. BOX 51272

City	State	Zip Code
MIDLAND	TX	79710-1272

Purpose of Disbursement

011

Candidate Name

MIKE CONAWAY

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: TX District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2015

Transaction ID : B1D31E0B65F6940698D2

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

8500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. HOEVEN FOR SENATE

Mailing Address PO BOX 861

City BISMARCK	State ND	Zip Code 58502-0861
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Purpose of Disbursement

Candidate Name

JOHN H. HOEVEN III

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: ND District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2015

Transaction ID : B0914F03110574F8BA16

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BUCSHON FOR CONGRESS

Mailing Address PO BOX 250

City NEWBURGH	State IN	Zip Code 47629
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Purpose of Disbursement

Candidate Name

LARRY D. BUCSHON

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IN District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2015

Transaction ID : B0AD00722B0AB4663963

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BOEHNER FOR SPEAKER

Mailing Address 320 FIRST ST., SE

City WASHINGTON	State DC	Zip Code 20003-1838
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Purpose of Disbursement
CONTRIBUTION TO COMMITTEE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2015

Transaction ID : BE27D355B3EF6478488E

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. BOEHNER FOR SPEAKER

Mailing Address 320 FIRST ST., SE

City
WASHINGTONState
DCZip Code
20003-1838Purpose of Disbursement
CONTRIBUTION TO COMMITTEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2015

Transaction ID : B395983BF80894315B68

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00

17000.00
